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CONFIRMATION NO. 8219

Bib Data Sheet

SERIAL NUMBER 10/810,082	FILING DATE 03/26/2004 RULE	CLASS 379	GROUP ART UNIT 2644	ATTORNEY DOCKET NO. 02-1757
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APPLICANTS

Robert L. Doss JR., Ringgold, GA;

David Lashley, Cartersville, GA;

Billy J. Worley, Hixson, TN;

** CONTINUING DATA *****

None WFB 4/15/2005

** FOREIGN APPLICATIONS *****

None WFB 4/16/2005

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/05/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 4	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

32681
PLANTRONICS, INC.
345 ENCINAL STREET
P.O. BOX 635
SANTA CRUZ, CA
95060-0635

TITLE

Adaptive duplexing for amplified telephone

FILING FEE RECEIVED 896	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input checked="" type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees (Filing) <input checked="" type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input checked="" type="checkbox"/> 1.18 Fees (Issue) <input checked="" type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Credit
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